# CLAIMS ONLY

| Application Number | Filing Date |
|---|---|
| 09/597,780 | |

Applicant(s)

* May be used for additional claims or amendments

| CLAIMS | AS FILED 11/25/05 | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
|---|---|---|---|---|---|---|
| | Indep | Depend | Indep | Depend | Indep | Depend |
| 1 | 1 | | | | | |
| 2 | X | X | | | | |
| 3 | | | | | | |
| 4 | | 1 | | | | |
| 5 | | 1 | | | | |
| 6 | | 1 | | | | |
| 7 | | 1 | | | | |
| 8 | | 1 | | | | |
| 9 | 1 | | | | | |
| 10 | X | X | | | | |
| 11 | | 1 | | | | |
| 12 | | 1 | | | | |
| 13 | | 1 | | | | |
| 14 | | 1 | | | | |
| 15 | | 1 | | | | |
| 16 | | 1 | | | | |
| 17 | | 1 | | | | |
| 18 | | 1 | | | | |
| 19 | | 1 | | | | |
| 20 | | 1 | | | | |
| 21 | X | X | | | | |
| 22 | | 1 | | | | |
| 23 | | 1 | | | | |
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| Total Indep | 6 | | | | | |
| Total Depend | 27 | | | | | |
| Total Claims | 33 | | | | | |

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| | Indep | Depend | Indep | Depend | Indep | Depe |
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| Total Indep | | | | | | |
| Total Depend | | | | | | |
| Total Claims | | | | | | |